## TRAVEL EXPENSE CLAIM

See Instructions and Privacy

IHAV		PENSE CLAIM	ı		See Instr	uctions ar	nd Privacy	¥						V	
STD 262 (REV 10/92) Stateme					Int on Reverse Side				Inchantaci	Page	. 1	of	1		
A CO Security and Control and											а				
Rachel Cameron						Press DIVISION OR BUREAU INDEX NUMBER									
50 Start William Collection				CB/ID MOMER	2R							NOEX NUMB	ER	377-247-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2	
Deputy Press Secretary RESIDENCE ADDRESS						Office of the Governor						TELEPHONE NUMBER			
WESINE VOLUME										ſ	TELEPHONE	NUMBER			
						State Ca	apitol			STATE					
							A SERVICE OF						05014		
					Sacranie	ento			CA			95814	T		
		LOCATION		<b> </b>	MEALS	Т	-		TRANSPORTA			ION			
MONTH/YEAR		WHERE EXPENSES	COSINO							CARFARE,		PRIVATE CAR USE		TOTAL	
Apr-09	TIME	WHERE EXPENSES WERE INCURRED	LODGING	BREAKFAST	LUNCH	DINNER	INCIDENTALS	COST OF	TOTAL LICED	TOLLS,	MILES	AMOUNT	EXPENSE	EXPENSES	
DATE	1 HAIPP	WERE MOURIED	<b></b>	BHEAKFAG	LUNCA	DINNER		TRANS.	TYPE USED	PARKING	MILES	AMOUNT		FOR DAY	
17-Apr	6:00 AM	San Luis Reservior		5.08							269	ed and the second secon		124.7	
17-Apr	7:00 PM	Long Beach				9.55					11	4.90	,	14.4:	
18-Apr	5:00 PM	Sacramento	140.90	)	3.36			289.20		51.53	11	4.90		489.89	
-20-Apr								139.60						144.50	
						-				1	11				
	7:15 PM	Sacramento		J		14,18		144.60	-	9.00	11	4.90		172.68	
22-Apr	4:30 AM	Los Angeles/Ontario		5.70		-		139.60		V		0.00		145.30	
<del>22-∧</del> pr	3:00 PM	Sacramento						148.60	1	33.00		0.00		181.60	
27-Apr	5:00 AM	Los Angeles						329.20		62,65	22		<u> </u>	401.64	
430	8:00 AM	Fairfield									93	41.39		41.39	
·												0.00		0.00	
										11. (2)		0.00		0.00	
												0.00		0.00	
												0.00		0.00	
	CUDT	OTAL O	140.00	10.78	2 26	23.73	0.00	1 100 80	0.00	156.18	128				
SUBTOTALS 140.90 COLUMN CODE (ACCTG USE ONLY)			10.78	3.36	23,73	0.00	1,190.80	0.00	156.18	428	190.46	0.00			
COLUMN	1000-10	ADDITO DOLLONG.	1		A AMAGANA	in an arrangement		48:00:00	<u> </u>	~ A /	<u>(</u>				
	CLAIM	TOTAL								104	e les	P	\$1,71	16.21	
PURPOS	E OF TRI	IP, REMARKS AND I	DETAILS	(Attach red	ceipts whe	en required	1)				NORMAL V	WORK HOU	JRS		
Staffed (	GS publi	ic events:													
4/17: W	ater Mar	rch at San Luis Re	eservior								PRIVATE VEHICLE LICENSE NUMBER				
4/17-4/1	8: Ed R	ecovery Act \$, Car	marillo J	High Sch	ool, Lon	g Beach			27 27 2 200						
		Center, Beuna Par					"	MILEAGE	RATE CLAII	MED					
4/22: Ea	rth Day	events in Glendor						0.445							
		obal Institute, Bev	W 200 7500												
		Act Construction F			Fairfield						AGEN	CY ACCOL	UNTING (	OFFICE	
		at the above is a true stater					-donce with D	no rules in th	to contine of	the State of	,	USE		en en en en en en	
and the second s														· · · · · · · · · · · · · · · · · · ·	
		owned vehicle was used ar								adnai to or	PAUL	Y REVOLVING F	UND CHECK IN	MBFH	
		imed, and that I have met the		nls as prescri	bed by SAM	Sections U/s	50, 0751,0752	2, 0753 and u	)754		2	40	500	ク	
berraining	Verliere su.	ly and doct bon company		_	DATE /	/	SIGNATURE	OF OFFICER A	APPROVING T	RAVEL AND P	AYMENT		DATE		
					493	100						1	-/	/	
					11/	0 1							5/12	/09	
SIGNATURE (	OF TITLE OF A	AUTHORITY FOR SPECIAL F	YPENSES										DATE	,	